

**Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions**

A Public Document

1. Agency Name City of Lemon Grove <hr/> Division, Department, or Region (if applicable) City Managers Department <hr/> Designated Agency Contact (Name, Title) Lydia Romero, City Manager <hr/> <table style="width:100%;"> <tr> <td style="width:50%;">Area Code/Phone Number</td> <td style="width:50%;">E-mail</td> </tr> <tr> <td>619-825-3800</td> <td>lromero@lemongrove.ca.gov</td> </tr> </table>		Area Code/Phone Number	E-mail	619-825-3800	lromero@lemongrove.ca.gov	Date Stamp <div style="font-size: 1.5em; color: blue; font-weight: bold;">RECEIVED</div> <div style="font-size: 1.2em; color: blue; font-weight: bold;">JUN 05 2018</div> <div style="font-size: 0.8em; color: blue; font-weight: bold;">CITY MANAGER DEPARTMENT</div> <input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) <hr/> Date of Original Filing: _____ <small>(month, day, year)</small>
Area Code/Phone Number	E-mail					
619-825-3800	lromero@lemongrove.ca.gov					

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 85.00

Event Description: LEAD San Diego Visionary Awards Date(s) 06 / 14 / 18
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: LEAD San Diego
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: _____
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
City of Lemon Grove Office of the Mayor	2	Performance of a ceremonial role or function representing the City at the event (Applicable City Policy 5.3, [a])
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (Include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

 _____ <small>Signature of Agency Head or Designee</small>	Lydia Romero _____ <small>Print Name</small>	City Manager _____ <small>Title</small>	<div style="font-size: 1.5em; color: blue; font-weight: bold;">5/7/18</div> _____ <small>(month, day, year)</small>
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Comment: _____